

FILED

SEP 02 2020

IN THE UNITED STATES DISTRICT COURT  
FOR THE WESTERN DISTRICT OF OKLAHOMA

CARMELITA REEDER SHINN, CLERK  
U.S. DIST. COURT, WESTERN DIST. OKLA.  
BY DRS DEPUTY

Phillip Fredrickson,

(Enter the full name of the plaintiff.)

v.

Case No. CIV-20-888-G  
(Court Clerk will insert case number)

(1) Rick Whitten Warden

(2) \_\_\_\_\_

(3) \_\_\_\_\_

(Enter the full name of each defendant. Attach additional sheets as necessary.)

PRO SE PRISONER CIVIL RIGHTS COMPLAINT

Initial Instructions

1. You must type or legibly handwrite the Complaint, and you must answer all questions concisely and in the proper space. Where more space is needed to answer any question, you may attach a separate sheet.
2. You must provide a full name for each defendant and describe where that defendant resides or can be located.
3. You must send the original complaint and one copy to the Clerk of the District Court.
4. You must pay an initial fee of \$400 (including a \$350 filing fee and a \$50 administrative fee). The complaint will not be considered filed until the Clerk receives the \$400 fee or you are granted permission to proceed *in forma pauperis*.
5. If you cannot prepay the \$400 fee, you may request permission to proceed *in forma pauperis* in accordance with the procedures set forth in the Court's form application to proceed *in forma pauperis*. See 28 U.S.C. § 1915; Local Civil Rule 3.3.

- If the court grants your request, the \$50 administrative fee will not be assessed and your total filing fee will be \$350.
- You will be required to make an initial partial payment, which the court will calculate, and then prison officials will deduct the remaining balance from your prison accounts over time.
- These deductions will be made until the entire \$350 filing fee is paid, regardless of how the court decides your case.

7. The Court will review your complaint before deciding whether to authorize service of process on the defendants. See 28 U.S.C. §§ 1915(e)(2), 1915A; 42 U.S.C. § 1997e(c)(1). If the Court grants such permission, the Clerk will send you the necessary instructions and forms.

8. If you have been granted permission to proceed *in forma pauperis*, the United States Marshals Service will be authorized to serve the defendants based on information you provide. If you have not been granted permission to proceed *in forma pauperis*, you will be responsible for service of a separate summons and copy of the complaint on each defendant in accordance with Rule 4 of the Federal Rules of Civil Procedure.

### COMPLAINT

I. Jurisdiction is asserted pursuant to:

✓ 42 U.S.C. § 1983 and 28 U.S.C. § 1343(a)(3) (NOTE: these provisions generally apply to state prisoners), or

\_\_\_ *Bivens v. Six Unknown Named Agents of Fed. Bureau of Narcotics*, 403 U.S. 388 (1971), and 28 U.S.C. § 1331 (NOTE: these provisions generally apply to federal prisoners)

If you want to assert jurisdiction under different or additional statutes, list these below:

N/A

N/A

N/A

**II. State whether you are a:**

- ☒ Convicted and sentenced state prisoner  
☐ Convicted and sentenced federal prisoner  
☐ Pretrial detainee  
☐ Immigration detainee  
☐ Civilly committed detainee  
☐ Other (please explain) \_\_\_\_\_

**III. Previous Federal Civil Actions or Appeals**

List each civil action or appeal you have brought in a federal court while you were incarcerated or detained in any facility.

**1. Prior Civil Action/Appeal No. 1****a. Parties to previous lawsuit:**Plaintiff(s): N/ADefendant(s): N/AN/A**b. Court and docket number:** N/A**c. Approximate date of filing:** N/A**d. Issues raised:** N/AN/AN/A

**e. Disposition (for example: Did you win? Was the case dismissed? Was summary judgment entered against you? Is the case still pending? Did you appeal?):** N/A

N/A**f. Approximate date of disposition:** N/A

If there is more than one civil action or appeal, describe the additional civil actions or appeals using this same format on a separate sheet(s).

IV. Parties to Current Lawsuit

State information about yourself and each person or company listed as a defendant in the caption (the heading) of this complaint.

1. Plaintiff

Name and any aliases: Phillip Fredrickson

Address: 216 N. Murray st Helena, OK 73741

Inmate No.: 264668

2. Defendant No. 1

Name and official position: Rick Whitten Warden  
of Prison

Place of employment and/or residence: Oklahoma  
Department of Correction

How is this person sued? ( ) official capacity, ( ) individual capacity, ( ☒ ) both

3. Defendant No. 2

Name and official position: N/A  
N/A

Place of employment and/or residence: N/A

How is this person sued? ( ) official capacity, ( ) individual capacity, ( ) both

If there are more than two defendants, describe the additional defendants using this same format on a separate sheet(s).

6. Do not include claims relating to your criminal conviction or to prison disciplinary proceedings that resulted in loss of good time credits.

- If a ruling in your favor "would necessarily imply the invalidity" of a criminal conviction or prison disciplinary punishment affecting the time served, then you cannot make these claims in a civil rights complaint unless you have already had the conviction or prison disciplinary proceeding invalidated, for example through a habeas proceeding.

### Claims

List the federal right(s) that you believe have been violated, and describe what happened. Each alleged violation of a federal right should be listed separately as its own claim.

1. Claim 1:

(1) List the right that you believe was violated:

The Warden refuse to transfer me to a "Mental Health" medical facility where I can be better managed which has 24 hour care. This is a violation of my 14<sup>th</sup> and 6<sup>th</sup> Amendment rights

(2) List the defendant(s) to this claim: (If you have sued more than one defendant, specify each person or entity that is a defendant for this particular claim.)

Rick Whitten

(3) List the supporting facts:

I have been denied and deprived of 24 hr. Mental Health Services at this facility I was diagnosed with bipolar, paranoid Schizophrenia and need to be at a 24 hr <sup>Medical</sup> Facility.

(4) Relief requested: (State briefly exactly what you want the court to do for you.)

To be Transferred to a 24 hr Medical facility for the life of me. Where I can be better managed.

2. Claim II:

(1) List the right that you believe was violated:

N/A

N/A

N/A

N/A

(2) List the defendant(s) to this claim: (If you have sued more than one defendant, specify each person or entity that is a defendant for this particular claim.)

N/A

N/A

N/A

N/A



(3) List the supporting facts:

N/A  
N/A  
N/A  
N/A

(4) Relief requested: (State briefly exactly what you want the court to do for you.)

N/A  
N/A  
N/A  
N/A

If there are more than two claims that you wish to assert, describe the additional claims using this same format on a separate sheet(s).

#### VI. Declarations

I declare under penalty of perjury that the foregoing is true and correct.

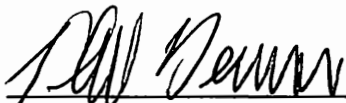


Plaintiff's signature

8-31-2020

Date

I further declare under penalty of perjury that I placed this complaint in the prison's legal mail system, with the correct postage attached, on the 31<sup>ST</sup> day of August, 2020.



Plaintiff's signature

8-31-2020

Date